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## FITZPATRICK, CELLA, HARPER & SCINTO

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FACSIMILE COVER SHEET

TO: Examiner: Daniel H. Pan FROM: John D. Magluyan, Reg. No. 56,867 RE: U.S. Application No. 09/587,052 Attorney Docket No. 00169.001736. FAX NO .: (571) 273-8300 DATE: NO. OF PAGES: October 5, 2005 9 (including cover page) TIME: SENT BY:

## **MESSAGE**

Attached are the following papers for the above-identified application:

- 1. Response To Final Office Action; and
- 2. Transmittal for Response To Final Office Action.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

October 5, 2005 (Date of Deposit)

> John D. Magluyan, Reg. No.56,867 (Name of Attorney for Applicant)

The M. Masleys.

October 5, 2005
Date of Signature

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PAGE 1/9 \* RCVD AT 10/5/2005 4:32:02 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/33 \* DNIS:2738300 \* CSID:714 540 9823 \* DURATION (mm-ss):02-08

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Response Under 37 CFR § 1.116 Expedited Procedure - Group 2183

In re Application of:

Docket No.

TIMOTHY JOHN LINDQUIST

00169.001736.

Application No.: 09/587,052

Examiner: Daniel H. Pan

Filed: June 2, 2000

Group Art Unit: 2183

For: RECONFIGURABLE VLIW PROCESSOR

Date: October 5, 2005

Mail Stop AF THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Response To Final Office Action in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		·i								
CLAIMS AS AMENDED										
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE				
TOTAL CLAIMS	18	MINUS	20	= 0	x \$25 \$50	\$.00				
INDEP. CLAIMS	4	MINUS	4	= 0	x \$100 \$200	\$.00				
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<sup>\*</sup> If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

Page 1 of 2

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant Registration No.: 56,867
30 Ro New	PATRICK, CELLA, HARPER & SCINTO cockefeller Plaza York, New York 10112-3800 mile: (212) 218-2200

Form #120

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	October 5, 2005 (Date of Deposit)  John D. Magluyan, Reg. No.56,867 (Name of Attorney for Applicant)								
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